

# Exhibit D

**SPRINGFIELD SPORTS – EMERGENCY  
MEDICAL CORPORATION**

Robert F. Sing, D.O., FACSM, FACEP, FAOASM, FACOEP  
Christopher A. Davis, D.O.

**SPORTS SCIENCE CENTER**

166 Saxer Avenue  
Springfield, PA 19064

Phone: (610) 328-7262  
FAX: (610) 328-4440

**SPORTS SCIENCE CENTER-SOUTH**

110 E. State Street, Suite E  
Kennett Square, PA 19348

Phone: (610) 444-9111  
FAX: (610) 444-9116

February 3, 2021

Brian Zeiger, Esquire  
LEVIN & ZEIGER, LLP  
Two Penn Center, Suite 620  
1500 John F. Kennedy Boulevard  
Philadelphia, PA 19102

Re: Richard Anglemeyer  
Date of Incident: 2/23/2018

Dear Mr. Zeiger:

Richard Anglemeyer sustained multiple injuries during a police raid that occurred on 2/23/2018.

Medical records, reports, and diagnostic studies were reviewed regarding the above case, including the following:

1. Amended Civil Complaint, Eastern District of Pennsylvania;
2. Plaintiff Answers to Interrogatories of Defendants (8/10/2020);
3. Primary care records and reports, Ellen Didimamoff, MD/ Bushkill Family Practice (12/3/2015, 3/30/2018, 5/17/2018);
4. Paramedic/EMS records and reports, Bushkill Township Volunteer Fire Company (2/23/2018);
5. Emergency medical records and reports, St. Luke's Hospital-Anderson (2/23/2018);
6. Undated photographs (2), Richard Anglemeyer showing three xanthochromic ecchymotic areas over his anterior neck;
7. Orthopedic records and reports, Chinenye Nwachuku, MD/St. Luke's Orthopedic Care;
8. Operative report, Brett Gibson, MD/St. Luke's Hospital-Anderson Specialty Pavilion Surgery Center (3/12/2020);
9. Deposition transcript, Richard Anglemeyer (11/5/2020);
10. Deposition transcript, Ada Anglemeyer (11/5/2020);
11. Deposition transcript, Renea Kluska (12/18/2020);
12. Deposition transcript, Kierra Kluska (12/18/2020);

Brian Zeiger, Esquire  
Richard Anglemeyer

-2-

February 3, 2021

13. Deposition transcript, Sargent Mark Rowlands (12/18/2020);
14. Deposition transcript, Corporal Brian King (10/1/2020);
15. Deposition transcript, Corporal Jason Pelotte (8/27/2020);
16. Deposition transcript, Trooper Matthew Wysocky (10/1/2020);
17. Deposition transcript, Trooper Peter Del Gaizo (10/1/2020);
18. Desk Memorandum/Personnel Investigation-IAD #2018-0210.

By way of review, Richard Anglemeyer was 77 years of age when, on 2/23/2018, he was at his home when police raided his house. According to the records, he was knocked to the ground onto his right knee and his face struck the wall resulting in an abrasion. After a call to 911, paramedic/EMS personnel were dispatched to the scene. Upon arrival of the EMS personnel, the patient was assisted to a stretcher and secured with 3 belts. The patient's complaints were concentrated on right knee pain, nasal pain, and blood present on the right side of his face near his eye. He was having difficulty ambulating with his right knee because of the pain. He also reported that he felt that there was something "stuck in his right eye". The patient was subsequently transported to the Emergency Department at St. Luke's Hospital-Anderson.

While at St. Luke's Hospital ED, the right eye was evaluated, and no evidence of corneal abrasion or foreign body was found. The facial abrasion was cleaned. X-ray of the right knee was completed showing no acute fractures or dislocations and no evidence of joint effusion. A calcified atherosclerotic plaque was noted, in addition to "age-appropriate degenerative changes". The patient was discharged with a diagnosis of right knee contusion and abrasion of the face. Upon discharge from the hospital, the patient was referred for outpatient orthopedic evaluation.

A telephone call was made to the Bushkill Family Practice office on 3/30/2018 essentially demanding an order for an MRI of the right knee due to his pain. On 5/17/2018, the patient noted bruises on his neck and throat (as portrayed by the 2 colored photographs provided in the records) after being thrown about by the police on 2/23/2018, and the patient noted that he had been depressed and "does not want to go out". He reported being fearful for his wife and sleeping more, but not restful sleep. The wife noted that "he has just not been himself". A diagnosis of PTSD (posttraumatic stress disorder) was made by the primary provider on this visit and the patient was prescribed on 3/15/2018 for PTSD as per the patient's description, but this was discontinued on 5/7/2018 and Zoloft 50 mg was prescribed for the diagnosis of PTSD.

The patient was evaluated by orthopedist Chinenye Nwachuku, MD from the St. Luke's Orthopedics on 5/2/2018 for continuing right knee pain, particularly over the lateral aspect of the knee that started after the 2/23/2018 police raid/assault. Physical examination revealed swelling over the lateral aspect of the right knee with associated tenderness to palpation with a stable varus deformity of the knee. The patient was placed in a hinged knee brace, instructed to continue taking his Naprosyn, and a right knee MRI study was ordered.

MRI study of the right knee completed without contrast on 9/24/2019 revealed a complex tear of the body and anterior horn of the lateral meniscus with a large associated complex para-meniscal cyst. In

Brian Zeiger, Esquire  
Richard Anglemeyer

-3-

February 3, 2021

addition, there was a horizontal tear noted in the posterior horn and body of the medial meniscus. Mild tricompartmental degenerative changes were also noted.

On 3/12/2020, on referral by Dr. Nwachuku, the patient was taken to the operating room at the St. Luke's Hospital Specialty Pavilion Surgery Center by orthopedist Bret Gibson, MD where arthroscopic partial medial and lateral meniscectomies, in addition to decompression of the para-meniscal cyst, were completed under general anesthesia.

A telemedicine conference was completed with the patient on 2/1/2021. The interview lasted 20 minutes from 11:25 AM until 11:45 AM. The history obtained directly from the patient was basically consistent with that noted above. The patient reported significant pain in his right knee from the police incident and noted in 2015 he had atraumatic right knee pain that lasted a few weeks for which his primary physician ordered an x-ray. He limped around with pain and swelling from 2/23/2018 when he struck his knee during the police assault up until his right knee surgery completed by Dr. Gibson noted above. At the present time, he has "0" pain in the right knee. In addition, his anxiety and panic attacks from his PTSD remain controlled with prescribed Zoloft, a medication that was prescribed for the PTSD and recurrent major depressive disorder by his PCP after the police assault. As a result of the Zoloft effects, he has not had to seek psychological counseling as the Zoloft controls his PTSD symptoms.

The patient's past medical history was significant for gout, benign prostatic hypertrophy with urinary retention and a recent diagnosis of prostate cancer, hyperlipidemia, urinary incontinence, and hypertension. (In the provided medical records, a 12/3/2015 progress note from Bushkill Family Practice noted the patient with acute atraumatic right knee pain.) More recently, the patient was diagnosed with polymyalgia rheumatica. His past surgical history was significant for cataract removal. His medication list included allopurinol, atorvastatin, Lexapro, nifedipine ER, and Flomax. The patient denied medication allergies. His family history was significant for alcohol abuse in his father. In his social history, the patient denied smoking cigarettes, alcohol use, or recreational drugs.

Based upon my 2/1/2021 telemedicine history interview, taking into consideration information provided in the above-noted medical records, reports, and diagnostic studies, it is my opinion that this patient suffered, to a reasonable degree of medical certainty, the following injuries that occurred during the police raid that occurred on 2/23/2018:

1. Complex tears of the medial and lateral menisci of the right knee;
2. Contusion, right knee;
3. Facial abrasions, contusion/hematomas of the neck;
4. PTSD.

Taking the entire situation into consideration, the patient has responded fairly well to the prescribed treatments that were prescribed for the trauma induced injuries historically caused by police during a raid that occurred on 2/23/2018. His overall prognosis regarding the 2/23/2018 injuries remains guarded. The surgical treatment to the right knee has provided at this time a good recovery without evidence of pain or swelling at the present time. Unfortunately, the common sequela to knee

Brian Zeiger, Esquire  
Richard Anglemeyer

-4-

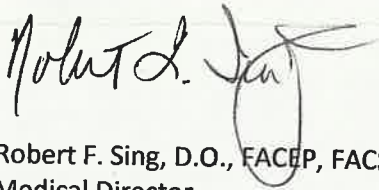
February 3, 2021

meniscectomy procedures is the development of posttraumatic osteoarthritis, and in the event this patient develops this expected complication, he will require injections and/or surgical repair that would include a total knee replacement. Fortunately, his PTSD symptomatology is well controlled with the Zoloft medication and he will, to a reasonable degree of medical certainty, continue to require this medication for the rest of his life. The facial abrasions and contusions of the neck (exemplified in the provided color photographs) are resolved.

All of the above opinions are stated to a reasonable degree of medical certainty.

If I can be of further assistance, please feel free to contact me.

Very truly yours,  
Sports Science Center

A handwritten signature in black ink, appearing to read "Robert F. Sing". The signature is fluid and cursive, with a large, stylized "S" at the end.

Robert F. Sing, D.O., FACEP, FACSM  
Medical Director